

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | JA | | 8/15/01 |
| O.I.P.E. CLASSIFIER | | 43 | 9/6/01 |
| FORMALITY REVIEW | MW | 920 | 10-24-01 |
| RESPONSE FORMALITY REVIEW | LI | 1106 | 1/10/02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|---------|
| Final | |
| Original | 8/15/01 |
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| Claim | Date |
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| Original | 8/15/01 |
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| Claim | Date |
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| Final | |
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If more than 150 claims or 10 actions
 staple additional sheet here

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 9/14/01
 885
 11/10

Jc4/920